

THE CALIFORNIA HeartLine

Building Heart-Healthy Communities in California

UCSF



SPECIAL FOCUS

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disease
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NEW FEATURE!

QUESTION from the HEART

Has your community
garden suffered from
vandalism?
Is it a real problem or
merely a perceived one?
Tell us how you've handled
vandalism in community
gardens.

SEND YOUR RESPONSES TO:
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Our Cities Have Heart

Mayors Honored for Promoting Heart Health

Recognizing that each mayor is truly the "heart" of his or her city, the American Heart Association office in the Inland Empire honored mayors primarily serving cities with high heart disease rates for their

role in helping to solve the problem. The first annual "Hearts of Our Cities Gala" included a reception, dinner and mayoral awards ceremony for sixteen area mayors.

Researchers with the Cardiovascular Disease Outreach, Resources and Epidemiology (CORE) program have found that San Bernardino and Riverside counties (the Inland Empire) have significantly higher rates of heart disease deaths and hospitalizations, as well as certain risk factors for

heart disease, compared to statewide rates. A report released by the CORE program in 1996 identified 45 cities throughout the state with high rates of death from heart disease and/or stroke. Fifteen of these cities are located in San Bernardino or Riverside Counties. Rates of physical inactivity, high blood pressure, smoking and obesity are high in the Inland Empire when compared to the ten regions of the state analyzed in the latest study by CORE.

A Gala is Born

In response to results from CORE's reports, the American Heart Association's Inland Empire office has taken the lead in educating city leaders about the problem of high rates of heart disease, and the unique role mayors can play in solving it. The American Heart Association began the program in fall 1998 by introducing the results of CORE's reports to mayors. Most mayors were unaware of the statistics on heart disease and stroke deaths, and found them compelling.

The first annual Gala showcased heart healthy programs being implemented by the mayors and their staffs. The cities of Fontana and Hesperia were recognized for starting new programs. Through these projects, Inland Empire mayors demonstrated their commitment to preventing heart disease and stroke by promoting physical activity and a healthy diet. These programs include:

Barstow refurbished city exercise facilities with the help of private industry.
Calimesa offered Tai Chi classes through the Senior Center.

Chino developed a 50 mile bike trail plan to promote exercise and improve air quality.

Chino Hills secured the designation of a Healthy City.

Corona promoted the availability of automatic external defibrillators (AED's) to the City Fire Department to revive victims of a heart attack. (continued next page)

And The (Heart) Beat Goes On

This issue of the California *HeartLine* focuses on food security. "Food security" examines how communities grow, purchase, and transport nutritious, culturally appropriate foods to their tables. Projects which make healthy foods accessible to communities are showcased.

Also, take note of the latest statistics on the prevalence of high blood pressure, diabetes, smoking, physical activity and overweight in your region.

A New Feature

We're starting a new regular feature: "Questions from the Heart." From time to time, we will be polling you to get your input on CVD prevention issues that affect all of us.

The *HeartLine* has long been an advocate of community gardens as a component of a Heart Smart Cities program. But stories of garden vandalization appear all too frequently. Are these stories rumor or truth? And if true, how have you dealt with the damage? Tell us and we'll share your insights in a future issue. See page one for details.

Pass us along

The California *HeartLine* is written for health professionals and anyone else wanting to promote heart health. Please let us know what you think, and how we can better meet your needs. E-mail, call, or write us at the address on the back cover.

Until the next issue,

The Editors



Cities Have Heart *(continued from page 1)*

Fontana established a walking club linking Neighborhood Watch, churches and employers.

Grand Terrace installed a city-wide bike lane and implemented a tobacco reduction program.

Hesperia placed health messages in the water bill, announcing free medical screenings.

Loma Linda has an active running club with a membership of more than 1,000.

Montclair won a three-year health promotion grant targeting Latino residents.

Ontario promoted membership at the local YMCA for city staff.

Rancho Cucamonga provided healthy meals and hypertension screening at the senior center.

Riverside won a grant to promote physical activity in adults over 50 years of age.

San Bernardino won a grant to promote heart health throughout the city.

Victorville recycled closed military bases into facilities for public recreation.

Yucaipa developed new zoning standards to promote foot, bicycle and equestrian trails and to preserve open space.

Sixteen area mayors were honored at the Hearts of Our Cities Gala on June 3, 1999. After a lively reception and a healthy dinner of poached salmon, the awards ceremony began. Twelve of the 16 par-



ticipating mayors personally attended to receive their award, most accompanied by their senior staff.

Plans for Next Year

The American Heart Association and their mayoral partners are already gearing up for next year's Gala,

AND THE WINNERS INCLUDE:

Ontario Mayor Gary C. Witt, with Gala Co-Chair Patti Aguiar (left); Riverside Mayor Ronald O. Loveridge with Gala Chair Toni Callicott.

ease and stroke in the Inland Empire, mayors who were approached to join in the effort were pleased to become involved. Yucaipa mayor Dan Crain calls the statistics "compelling" in justifying the need for city officials to participate. Ontario mayor Gary Ovitt has asked for additional sharing of descriptions of heart healthy programs, likely through the American Heart Association Gala newsletter. He is welcoming new options for additional, possibly life-saving programs in his city. Riverside mayor Ronald Loveridge praised the event for "heightening awareness of the risks of cardiovascular disease and



planned for May 2000. Suzie Montoya, Social Market Director for the American Heart Association, says the second annual event will follow the same format because mayors need support for their work in health. Invitations to join in the May 2000 event will be extended to Indian Tribal Council Chiefs and to half a dozen additional city mayors. David Bernal, Area Vice President of External Affairs for Pacific Bell, and Sharon Roberts, Senior Vice President with Inland Empire National Bank, are this year's new co-chairs for the Gala, and bring their expertise and enthusiasm to the event.

With the ultimate goal of reducing the rate of heart dis-

stroke, as well as promoting the need for lifestyle changes." William Alexander is mayor of Rancho Cucamonga which is the only Inland Empire city cited for low death rates due heart disease and stroke. He speaks of pride "in being involved with the American Heart Association event because of the Association-funded research, particularly important to us in light of the unfortunate experience of so many individuals with heart disease and stroke in the Inland Empire."

For more information about the Hearts of Our Cities Gala, contact Suzie Montoya at (909) 424-1670.

Heart Health Information for Everyone

Minority Group-Oriented Fact Sheets

The California Cardiovascular Disease Prevention Coalition has developed fact sheets on heart disease and stroke for African Americans, Asian/Pacific Islanders, Latinos, and American Indians. The fact

sheets present data on CVD mortality and risk factors, as well as what those communities can do to support heart health.

The fact sheets are free and can be obtained by contacting the CVD Prevention Coalition at (916) 445-2544, or www.CVD-Coalition.org.

NEWSLETTERS

Keep abreast of the activities of the California Nutrition Network with *The Networker*. The Nutrition Network promotes healthy eating and physical activity through the largest nutrition coalition ever.

Subscriptions are free. Contact Mary Nichols at 916-445-5494.

Community Food Security News-A quarterly publication of the Community Food Security (CFS) Coalition. Its mission is to promote comprehensive systems-oriented solutions to the nation's food and farming problems. CFS's approach emphasizes the need to build community institutions to ensure access and availability for community residents.

This comprehensive newsletter is available to coalition members (organizations or individuals.) Membership fees average \$25 annually. Contact CFS Coalition at

P.O. Box 209, Venice, CA 90294;
E-mail asfisher@aol.com or visit:
www.foodsecurity.org.

CANFit Connection- The mission of the California Adolescent Nutrition and Fitness (CANFit) Program is to improve the nutritional and physical fitness status of California's low-income, African American, Latino, Asian/Pacific Islander, and American Indian youth between the ages of 10 and 14. *CANFit Connection* is published twice a year on topics relating to the CANFit grants program and other

physical activity and nutrition news.

This publication is free and you can subscribe by calling Beverly Barnes at (510) 644-1535.

Closing the Gap is a monthly newsletter

from the Office of Minority Health. Each issue is devoted to a specific health topic of concern to minority communities.

To be placed on the mailing list for upcoming issues, call the Resource Center at 1-800-444-6472. *Closing the Gap* is published by The Office of Minority Health Resource Center, Office of Public Health and Science, U.S. Department of Health and Human Services.

PROJECT LEAN REGIONAL NEWSLETTERS

Community Action! is a newsletter from the Project LEAN Southern Region in partnership with the Nutrition Network. It focuses on physical activity and nutrition activities in San Bernardino County.

To subscribe to this free publication contact: Project LEAN San Bernardino at (909) 387-6320; or e-mail ejara@ph.co.san-bernardino.ca.us.

Fit, Healthy and Happy is the Project LEAN Southern Coast Region newsletter. It is published three times a year.

To subscribe to this free publication contact: Joan Rupp, (760) 436-6162; or rupp@mail.sdsu.edu

LEAN News is the Project LEAN Central Valley Region newsletter. This quarterly newsletter is written for public health professionals and nutrition and physical activity advocates. They also publish *The Healthy Family*, which is written for low income populations. This publication is distributed through county food stamp voucher mail distribution and at emergency food distribution sites. Both publications are free of charge.

Subscription requests may be directed to: Patty Minami, Project LEAN University of California Cooperative Extension
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Fresno, CA 93702-4516
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plminami@ucdavis.edu



Connections is the quarterly newsletter for The Center for Civic Partnerships-California Healthy Cities and Communities. The newsletter focuses on the health of communities and its total environment—including the physical surroundings, economic conditions, and social climate.

To subscribe to this free quarterly newsletter contact: California Healthy Cities and Communities at (916) 646-8680; or e-mail: chcc@cwo.com

WIN Notes- The Weight-control Information Network (WIN) is a national information service of the National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK), National Institutes of Health (NIH). This is a quarterly newsletter for health professionals which features the latest information from NIDDK and other organizations on obesity, weight control, and weight-related nutritional disorders. *WIN Notes* also lists resources available from other organizations, and reports on the National Task Force on Prevention and Treatment of Obesity activities.

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E-mail: WIN@info.niddk.nih.gov ♥





Eating Well



Means Having



Enough to Eat

What is 'Community Food Security'
and Why Is It Relevant to Preventing
Cardiovascular Disease?

By Karen Harris, MPH

To those unfamiliar with the term "community food security," it brings to mind images that have little to do with preventing cardiovascular disease: rifle-wielding guards stationed outside the wheat silo; public health inspectors, checking for meat spoilage; or maybe a troop of survivalists, sweatily clutching Y2K-preparedness manuals as they stockpile

canned peaches in hidden mountain caves. In actuality, the Urban Institute defines food security as "all people in a community obtaining a culturally acceptable, nutritionally adequate diet through non-emergency (or conventional) food sources at all times."ⁱ

When we look at the populations in California most at risk of developing cardiovascular disease, we see an overlap with groups that are not food-secure. People who have lower incomes and less education are at greater risk of developing cardiovascular disease.ⁱⁱ They are also more likely to live in neighborhoods where there are fewer supermarkets ⁱⁱⁱ, lower-quality produce and meats, and higher prices than in middle-class areas. ^{iv} Because rates of car ownership are low in low-income communities,^v residents depend on public transportation, and tend to shop at nearby stores rather than choosing on the basis of price or quality.^{vi} Thus, food security issues influence whether or not people have access to a heart-healthy diet, and are important to cardiovascular disease prevention.

The concept of "food security" has often been used in discussions of international hunger to describe the ability of a country to provide adequate amounts of food for its citizens.^{vii} In the United States, people do not go hungry because the nation lacks sufficient quantities of food or the technical ability to distribute it. Rather, inequities in our society make it harder for low-income people to afford, and gain access to, nutritious foods. The reasons for this are multifaceted, involving gaps in governmental systems as well as trends within the private and agricultural sectors.^{viii} Pricing and availability of nutritious foods are influenced by factors such as supermarket location, transportation, market pressures, and ownership and control of the food system.^{ix}

Because these factors tend to play out at the community level, in the early 90's a broad coalition of advocates seeking solutions to the nation's food and farming crises met to reconsider the concept of "food security" from a community perspec-

DEFINING FOOD SECURITY

According to Andy Fisher of the Community Food Security Coalition, the six basic principles of Community Food Security are:

Meeting the needs of low-income communities;

Addressing a broad range of problems that impact the food delivery system (i.e. disappearing farmland and family farms, inner city supermarket 'redlining,' suburban sprawl, and air and water pollution from unsustainable food production and distribution patterns);

Building a community's food resources to meet its own needs;

Building individuals' skills and abilities to provide for their own food needs;

Increasing local farmers' access to markets that pay them decent prices; and

Fostering an inter-disciplinary, "systems approach" to identifying barriers to the distribution of food and other resources in a community.^{xiv}

tive. In 1994 these advocates convened, producing a legislative proposal entitled, "The Community Food Security Empowerment Act of 1995." Borrowing perspectives from many different fields, their new conceptualization of community food security sought to integrate "public health's prevention orientation, ecology's systems analysis, and community development's place-centered focus and emphasis on economic development into a comprehensive framework for meeting a community's food needs."^x

Community food security identifies root economic and structural causes of hunger in neighborhoods, and involves community residents in creating solutions.^{xi} This differs from the approach of traditional anti-hunger programs, which focus on developing and improving emergency services to meet immediate individual-level needs.^{xii} University of California, Los Angeles researchers Linda Ashman et al. have clarified that "...hunger is based on an individual experience unrelated to societal factors, (but) food security takes into account both community and individual resources."^{xiii}

Big Business Affects Access

In the 1990's, the industry-wide trend of supermarket mergers throughout the nation has presented one example of private sector influence upon community food security. As grocery stores have consolidated, causing Americans to purchase their food from "fewer, bigger companies,"^{xv} an unintended ripple effect occurs throughout the food system. Not only are the price and availability of nutritious foods potentially impacted, but so are the wages paid to laborers, prices paid to farmers for their produce, and business opportunities for smaller businesses.

Due to mergers, reduced competition between supermarkets can lead to price increases. At the same time, merged chains can use economies of scale to obtain volume discounts from agribusiness, thus precluding small and medium-sized farmers from gaining access to their market. The competitive nature of the supermarket industry means that highly leveraged companies cannot afford to maintain the least profitable stores in their chains. Since inner city stores tend to be less profitable than suburban ones, they are most readily sacrificed. Among those stores that do remain in the inner city, there are fewer incentives to reduce prices, because competition is minimal.

In an effort to keep costs down, leveraged chains have also forced concessions from labor unions. Market conditions for

Network Makes Food Security a Priority

The California Department of Health Services' California Nutrition Network for Healthy, Active Families awarded four grants to local agencies to promote nutrition education and physical activity among low-income residents. The Network awarded a total of \$107,000 for the period January 1, 1999 to September 30, 1999, and the projects will be extended for a second year (10/1/99 to 9/30/00). Four awards of \$10,000 to \$15,000 each will be made for planning grants during this same time frame. Call Frank Buck at (916) 445-1305 for more information.

Berkeley Youth Alternatives (BYA)

The project hired eight youth employees from low-income African American and Latino families to: 1) help children in an established Children's Garden; 2) conduct nutrition education workshops for children ages eight to 12; 3) disseminate nutrition information at the Berkeley Farmers Market and local check cashing centers; and, 4) promote healthy eating during BYA Parents' Organization meetings.

University of California Cooperative Extension, Los Angeles County

To develop *Food from the Garden*, a nutrition education program developed with input and pilot testing with families active in 20 community gardens located in low-income areas in Los Angeles. The project will create a training and how-to manual in English and Spanish for use in community garden settings in Los Angeles with prospects for distributing to other areas throughout the state.

Occidental College, UCLA

This project will expand the number of distribution sites of an existing Market Basket Program, which purchases produce in bulk at a discount and distributes it through neighborhood sites such as schools, child care centers, and social service agencies. The project will also expand the number of schools offering The Farmer's Market Salad Bar, a tested model in low resource schools that increases children's fruit and vegetable consumption.

Trinity County

This is a collaborative of the Trinity County Department of Health and Human Services, Trinity County WIC Program, and Trinity County Office of Education, Human Response Network, and the Hayfork Community Center to improve the nutrition of low-income residents in Trinity County in northern California. The project mails nutrition education materials quarterly to the County's public assistance case load; offers monthly classes on topics such as nutrition, starting a home garden, and low cost meal planning; and, has established two new community gardens.

smaller grocery stores can become prohibitive, causing small businesses to close, or to avoid coming into areas where they must compete with a large chain. Thus, the industry trend of supermarket consolidations can strain food security in low-income neighborhoods by leading to price increases, fewer places to shop, fewer jobs and business opportunities, and fewer venues for small farmers to sell their produce.

Neighborhood Action

Communities working to achieve food security have experimented with a variety of approaches to gaining control over their local food system. For example, many groups have successfully instituted farmers' markets in low-income neighborhoods where access to fresh produce is limited.^{xvi} Others have conducted community organizing campaigns to open a grocery store in their neighborhood,^{xvii} or to



improve conditions within a previously existing market.^{xviii} Another interesting strategy has been to work with city governments to improve public transportation from low-income neighborhoods to high-quality grocery stores.^{xix} Some stores have even agreed to sponsor their own shuttle bus to elderly housing projects or other areas of concentrated housing.^{xx} Market share programs can help to support small and medium-sized local farmers, while also providing fresh, seasonal produce to neighborhoods.^{xxi}

Community gardens, on the other hand, offer an opportunity for people to come together, for children to learn about and become involved in food production and, occasionally, for people to supplement their incomes by selling the produce that they grow.^{xxii}

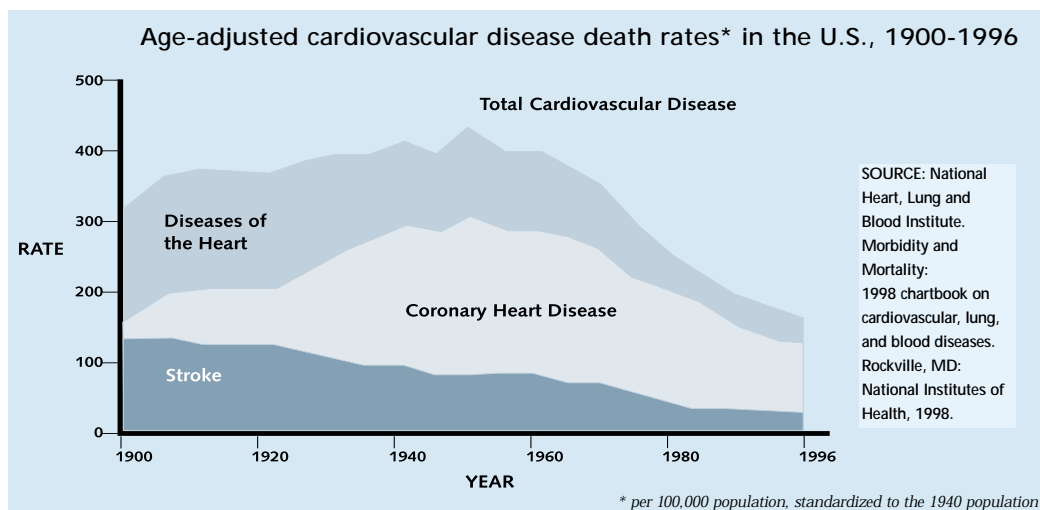
Food Security is Heart Smart

Because of its emphasis on helping communities to develop sustainable solutions to their food needs through community development activities, community food security bears a powerful relation to cardiovascular disease prevention. Recent research in the United States has shown that, as a population's socioeconomic status declines, so does its cardiovascular health.^{xxiii} Therefore, in order to reduce class disparities in the rates of cardiovascular illness and death, it is necessary to improve not only the diet and physical activity options and habits of low-income people, but their overall living conditions as well. The community food security

movement is building strategies to achieve this balance. It works to improve access to nutritious foods for low-income people—but it is also using food, an issue so central to all of our lives, as a way to foster broader social changes within communities. ♥

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Association notes that the actual numbers of people dying from heart disease and stroke have risen 37 percent since 1950 because of aging and population growth. That translates into 200,000 of the 500,000 heart disease deaths annually. But adjusting for age, researchers eliminate that expected bulge in death rates because of an aging population. Even after the age adjustment, the decline from two and a half to three percent in heart disease death rates that began in 1968 began to level off in 1990. Since then it has been flat for the U.S. as a whole.

Good Work, Bad News

Decline in Heart Deaths Leveling Off

The nation's 30-year decline in death rates from heart disease and stroke has slowed dramatically in the 1990s. Flagging progress in the fight against the nation's No. 1 killer has prompted elite heart specialists to gather and to examine

what has gone wrong.

"Our main concern is that the decline we've all benefited from appears to be petering out and possibly going back up," says Thomas Pearson of the University of

Rochester. "The myth was that heart disease was beaten and on the run. That's not the case."

The trend in stroke deaths offers an even more alarming example, says Edward Sondik

of the National Center for Health Statistics. In the 1990s, age-adjusted death rates for stroke dropped just two percent compared with 17 percent in the 1980s, he says.

The American Heart

The Next Challenge
Rodman Starke of the American Heart Association says, "The declines are slowing because most of the low-hanging fruit has been picked." This means that most of those people inclined to eat better, exercise and quit smoking have done so. Now the more intractable risks—obesity, teen smoking, poverty and a lack of access to health care—must be tackled. ♥

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HEART SMART PROFILE

Celina Gomez

Community Leader, San Bernadino

Each issue, *HeartLine* spotlights the work of a Heart Smart Cities leader who makes a special contribution to their community.

Celina Gomez has lived in the City of San Bernardino for the past eleven years with her husband, Javier, and two sons, Javier Jr. and Daniel. Celina likes living in San Bernardino because her sisters and brother live here, and she is able to spend the weekends and holidays with them. In her spare time, Celina likes to read and do fun things with her husband and sons.

Works Well With Others

Celina first came into contact with the Healthy Partners in Motion Low Impact Aerobics classes as a participant in the class offered at Mill Community Center. Celina was looking for a nice friendly atmosphere to exercise and an opportunity to get away from the house to meet new people. For the first ten months Celina faithfully exercised before she was asked to become a Peer Exercise Instructor for the department at Lytle Creek's

Community Center. Although it took a little time to get the class going, Celina has managed to develop the class to the point that it meets three times a week, with 15 to 20 committed students attending.

Committed to Help

Celina has learned many things from this program. She is convinced that healthy food and physical activity help



prevent heart disease, and she thinks more programs like hers should be offered free to the public to make them aware of the risk of heart disease and that it is preventable. This is partly why she loves her job as an aerobic exercise instructor.

When asked what she thought is the most important thing Anaheim can do to become Heart Smart, she replied, "We need to inform people about the program. Send flyers to the schools, and especially reach out through Hispanic radio stations because that community needs to learn more about the risk of heart disease."



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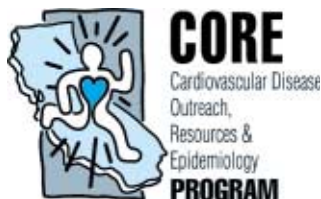
HeartLine is a quarterly publication of the California Cardiovascular Disease Outreach, Resources and Epidemiology (CORE) Program. CORE is conducted by the University of California, San Francisco, Institute for Health & Aging, under agreement with the California Department of Health Services.

Our mission is to empower public health professionals to lead and coordinate community involvement in cardiovascular disease (CVD) prevention in California.

We encourage you to duplicate and share this newsletter with others.

Coming Next Issue

- *The impact of poverty on health • The income gap in the U.S.*
- *Socioeconomic status and cardiovascular disease (CVD)*
- *Another Heart Smart City community leader profile*
- *Distressed neighborhoods*
- *Heart healthy resources and the latest CVD news*



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